

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Spec. Del. Recd.

14 OCT 27 PM 1:35
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Gordon Ball for Senate Committee

ADDRESS (number and street) ▼

PO Box 52930

Check if different
than previously
reported. (ACC)

Knoxville

TN

37950

2. FEC IDENTIFICATION NUMBER ▼

C C00557496

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

TN

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

☒

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M
11 04

D D

Y Y
2014in the
State of

TN

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M /

in the
State of

5. Covering Period

M M
10 01

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2014

through

M M
10 15

D D

Y Y
2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas C. Jessee

Signature of Treasurer

Thomas C. Jessee

Date

M M
10 20

D D

Y Y
2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)